ST. JOSEPH RESIDENCE

107	EAST	BECKERT	ROAL
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54961 Phone: (920) 982-5354 Ownership: Nonprofit Church/Corporation NEW LONDON Skilled Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Yes Number of Beds Set Up and Staffed (12/31/05): 107 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 107 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 98 Average Daily Census: 102

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	% 	Age Groups 	* 	 Less Than 1 Year 1 - 4 Years	42.9
Developmental Disabilities	0.0	Under 65	2.0	More Than 4 Years	18.4
Mental Illness (Org./Psy)	18.4	65 - 74	11.2		
Mental Illness (Other)	6.1	75 - 84	24.5		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	39.8		
Para-, Quadra-, Hemiplegic	1.0	95 & Over	22.4	Full-Time Equivalent	
Cancer	5.1			Nursing Staff per 100 Resid	ents
Fractures	5.1	İ	100.0	(12/31/05)	
Cardiovascular	20.4	65 & Over	98.0		
Cerebrovascular	9.2			RNs	13.2
Diabetes	15.3	Gender	8	LPNs	6.1
Respiratory	3.1			Nursing Assistants,	
Other Medical Conditions	16.3	Male	24.5	Aides, & Orderlies	43.1
		Female	75.5	j	
	100.0	İ		j	
		İ	100.0	j	

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	2	2.7	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.0
Skilled Care	10	100.0	364	68	93.2	120	0	0.0	0	15	100.0	188	0	0.0	0	0	0.0	0	93	94.9
Intermediate				3	4.1	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	3.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	10	100.0		73	100.0		0	0.0		15	100.0		0	0.0		0	0.0		98	100.0

ST. JOSEPH RESIDENCE

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	7.2	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	8.1	Bathing	1.0		85.7	13.3	98
Other Nursing Homes	4.5	Dressing	15.3		81.6	3.1	98
Acute Care Hospitals	71.2	Transferring	24.5		52.0	23.5	98
Psych. HospMR/DD Facilities	0.0	Toilet Use	38.8		42.9	18.4	98
Rehabilitation Hospitals	0.0	Eating	58.2		41.8	0.0	98
Other Locations	0.9	******	******	*****	******	******	*****
Total Number of Admissions	111	Continence		ક	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	9.2	Receiving Resp	iratory Care	14.3
Private Home/No Home Health	21.2	Occ/Freq. Incontiner	nt of Bladder	53.1	Receiving Trac	heostomy Care	1.0
Private Home/With Home Health	13.3	Occ/Freq. Incontiner	nt of Bowel	28.6	Receiving Suct	ioning	1.0
Other Nursing Homes	1.8	_			Receiving Osto	my Care	3.1
Acute Care Hospitals	8.8	Mobility			Receiving Tube	Feeding	1.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	1.0	Receiving Mech	anically Altered Diets	41.8
Rehabilitation Hospitals	0.0				3	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	35.4	With Pressure Sores		12.2	Have Advance D	irectives	99.0
Total Number of Discharges		With Rashes		1.0	Medications		
(Including Deaths)	113				Receiving Psyc	hoactive Drugs	20.4

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

*************	******	*****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.3	94.2	1.01	88.8	1.07	88.3	1.08	88.1	1.08
Current Residents from In-County	59.2	76.6	0.77	81.0	0.73	70.5	0.84	77.6	0.76
Admissions from In-County, Still Residing	26.1	23.1	1.13	23.7	1.10	20.5	1.28	18.1	1.44
Admissions/Average Daily Census	108.8	116.9	0.93	124.7	0.87	123.5	0.88	162.3	0.67
Discharges/Average Daily Census	110.8	121.8	0.91	127.4	0.87	126.7	0.87	165.1	0.67
Discharges To Private Residence/Average Daily Census	38.2	52.4	0.73	53.4	0.72	50.1	0.76	74.8	0.51
Residents Receiving Skilled Care	96.9	98.1	0.99	96.8	1.00	94.1	1.03	92.1	1.05
Residents Aged 65 and Older	98.0	97.5	1.00	92.1	1.06	92.5	1.06	88.4	1.11
Title 19 (Medicaid) Funded Residents	74.5	66.4	1.12	68.7	1.08	70.2	1.06	65.3	1.14
Private Pay Funded Residents	15.3	23.7	0.65	18.5	0.83	19.0	0.80	20.2	0.76
Developmentally Disabled Residents	0.0	0.3	0.00	0.4	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	24.5	37.4	0.66	38.6	0.63	37.2	0.66	32.9	0.74
General Medical Service Residents	16.3	22.9	0.71	24.6	0.66	23.8	0.69	22.8	0.72
Impaired ADL (Mean)	42.2	49.9	0.85	48.5	0.87	47.2	0.90	49.2	0.86
Psychological Problems	20.4	57.1	0.36	57.4	0.36	58.9	0.35	58.5	0.35
Nursing Care Required (Mean)	9.4	6.4	1.47	7.1	1.32	7.1	1.33	7.4	1.27